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## BIB DATA SHEET

CONFIRMATION NO. 9326

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/522,766	02/27/2006 RULE	514	1614	29287	
<b>APPLICANTS</b> Daphne Atlas, Jerusalem, ISRAEL; Eldad Melamed, Tel Aviv, ISRAEL; Daniel Offen, Kfar HaRoe, ISRAEL;					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL03/00635 07/31/2003 which claims benefit of 60/400,114 08/02/2002					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b>					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/MEGHAN R FINN/</u> <small>Examiner's signature</small>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWINGS</b> 8	<b>TOTAL CLAIMS</b> 19	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Martin Moynihan Anthony Castorina 2001 Jefferson Davis Highway Suite 207 Arlington, VA 22202 UNITED STATES					
<b>TITLE</b> Treatment of multiple sclerosis with brain targeted anti oxidant compounds					
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		